

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number

101786990
1232-5296

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|----------------------------------|---------------|--------------------------|
| TOTAL CLAIMS | 10 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 10 minus 20 = | 0 |
| INDEPENDENT CLAIMS | 1 minus 3 = | 0 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | <input type="checkbox"/> |

| SMALL ENTITY TYPE | OTHER THAN OR SMALL ENTITY |
|----------------------|-------------------------------|
| RATE | FEES |
| BASIC FEE | 385.00 |
| OR | BASIC FEE |
| XS 9= | 770.00 |
| OR | XS18= |
| X43= | 0 |
| OR | X86= |
| +145= | 0 |
| OR | +290= |
| TOTAL | 770 |
| OR | TOTAL |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|---|------------|---|---|
| AMENDMENT A | 7-16-07 | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | * | 10 | Minus |
| Independent | * | 1 | Minus |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| SMALL ENTITY | OTHER THAN OR SMALL ENTITY |
|---------------------|-------------------------------|
| RATE | ADDI- TIONAL FEE |
| X\$ 9= | |
| OR | X\$18= |
| X43= | |
| OR | X86= |
| +145= | |
| OR | +290= |
| TOTAL ADDIT. FEE | TOTAL ADDIT. FEE |
| OR | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|------------|---|---|
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | * | Minus | ** |
| Independent | * | Minus | *** |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDI- TIONAL FEE |
|---------------------|------------------------|
| X\$ 9= | |
| OR | X\$18= |
| X43= | |
| OR | X86= |
| +145= | |
| OR | +290= |
| TOTAL ADDIT. FEE | TOTAL ADDIT. FEE |
| OR | |

| | (Column 1) | (Column 2) | (Column 3) |
|---|------------|---|---|
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR |
| Total | * | Minus | ** |
| Independent | * | Minus | *** |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDI- TIONAL FEE |
|---------------------|------------------------|
| X\$ 9= | |
| OR | X\$18= |
| X43= | |
| OR | X86= |
| +145= | |
| OR | +290= |
| TOTAL ADDIT. FEE | TOTAL ADDIT. FEE |
| OR | |

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.